PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

Application or Docket Number

i-		01.41240											
CLAIMS AS FILED - PART I								SMALL	. ENT	ידר		ОТН	ER THAN
-	TOTAL CLAIM	IS	(Colur	nn 1)	(Co	lumn 2)	7	TYPE			OF		L ENTITY
FOR							-	RATI		FEE	_	RATE	FEE
TOTAL CHARGEABLE CLAIMS				NUMBER FILED		NUMBER EXTRA		BASIC	EE 1	50.00	⁰ OF	BASIC FI	300.00
-				minus 20= *				X\$ 25	=		OF	X\$50=	
⊢	DEPENDENT		minus 3 = "				X100			OF	X200=		
L	OLTIPLE DEPI	ENDENT CLAIM	PRESENT					+180=	_		7		
* If the difference in column 1 is less than zero, enter "0" in column							1	TOTAL			OF	L	+ -
CLAIMS AS AMENDED - PART II									<u> </u>		OR		
_	γ	(Column 1)		(Column 2) (Column 3)				SMAL	L EN	ПТҮ	OR		R THAN . ENTITY
ITΑ	41305	CLAIMS REMAINING AFTER	,	HIGHE	ER	PRESENT] [DATE		DDI-	7		ADDI-
MEN		AMENDMENT		PREVIO		EXTRA		RATE		TIONAL FEE		RATE	TIONAL
AMENDMENT A	Total Independent	+ 24	Minus	- 2	O'	= 4		X\$ 25=	.		OR	X\$50=	200
Æ		RST PRESENTATION OF MULTIPLE DEF		PENDENT	S AIM	=		X100=			OR	X200=	
	· · · · · · · · · · · · · · · · · · ·			LitoLiti				+180=			OR	+360=	
							L	TOTA				TOTAL	
		(Column 1)		(Columi	n 2)	(Column 3)	. Al	DDIT. FEE	<u> </u>		JON /	ADDIT. FEE	$\Delta U U$
00		CLAIMS REMAINING		HIGHE	ST		Г		T A C	DI-	ır		
Z		AFTER AMENDMENT		PREVIOU PAID FO	SLY	PRESENT EXTRA		RATE	TIO	NAL		RATE	ADDI- TIONAL
AMENUMENT	Total	*	Minus	**		=		X\$ 25=	FE	<u>-</u>		Vero	FEE
ž (Independent	*	Minus	***		=	\vdash		 		OR	X\$50≃	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT C	LAIM		L	X100=	 		OR	X200=	
				-				+180=		ŀ	OR	+360≃	
							AD	TOTAL DIT. FEE			OR A	TOTAL DDIT. FEE	
_		(Column 1)		(Column		(Column 3)							
		CLAIMS REMAINING AFTER AMENDMENT	. -	HIGHES NUMBER PREVIOUS PAID FOI	R	PRESENT EXTRA	F	RATE	ADD	IAL	Γ	RATE	ADDI- TIONAL
	Total	*	Minus	**		= .	T,	\$ 25=	- FEI		- F	<u> </u>	FEE
	ndependent	•	Minus	***		=	-			4	OR	X\$50=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						X	100=	·		OR _	X200=	
14 •	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									c	DR .	+360=	
- 84 (ne mignest Nun	Ann	TOTAL IT. FEE		-	DR DR	TOTAL						
- 44	me untriest Milli	nber Previously Paid per Previously Paid	n For IN THIS	CDACE in Inc	4				ropriate		AD	DIT. FEE L In 1.	
	TO-875 (Rev 10)							·				••	